

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.

10-167709

FILING DATE

01-28-04

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
2						
3						
4						
5						
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12	/					
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18	/					
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22	/					
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28	/					
29						
30						
31						
32						
33		2				
34		2				
35		2				
36		1				
37		1				
38		1				
39		1				
40	/					
41		1				
42		1				
43		1				
44	/					
45		1				
46		2				
47	/					
48		1				
49		1				
50		1				
TOTAL IND.	13					
TOTAL DEP.	63					
TOTAL CLAIMS	76					

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51	/					
52		1				
53	/					
54		1				
55		1				
56		1				
57		1				
58		1				
59		1				
60	/					
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						